

**UNITED STATES DISTRICT COURT
DISTRICT OF OREGON**

In the Matter of the Application of

(full name of applicant)

**for Special Temporary MDL Admission to the Bar of the United States
District Court for the District of Oregon**

**Application for Special Temporary MDL Admission
and CM/ECF Registration**

I am applying for special temporary admission to the Bar of the United States District Court for the District of Oregon for purposes of participating in _____, a case that has been transferred to the District of Oregon pursuant to 28 U.S.C. § 1407 (Multi-District Litigation). In support of this application, I certify that I am an active member in good standing with the _____ State Bar; that I have read and am familiar with the Federal Rules of Evidence, the Federal Rules of Civil and Criminal Procedure, the Local Rules of this Court, and this Court's Statement of Professionalism.

I understand that my admission to the Bar of the United States District Court for the District of Oregon is solely for the purpose of litigating in the above matter and will be terminated upon the conclusion of the matter.

(1) PERSONAL DATA:

Name: _____
(Last Name) (First Name) (MI) (Suffix)

Agency Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Business E-mail Address: _____

(2) EDUCATION:

(a) Undergraduate School: _____ Year Graduated: _____

(b) Graduate School: _____ Year Graduated: _____

(c) Law School: _____ Year Graduated: _____

(3) BAR ADMISSIONS INFORMATION:

(a) State bar admission(s), date(s) of admission, and bar ID number(s):

(b) Other federal court admission(s), date(s) of admission, and bar ID number(s):

(4) CERTIFICATION OF DISCIPLINARY ACTIONS:

(a) ☐ I am not now, nor have I ever been subject to any disciplinary action by the Oregon State Bar or any other state bar in which I am a member.

(b) ☐ I am currently or have been subject to disciplinary action, and I have applied for reinstatement to the Oregon State Bar or other state bar. (Attach a copy of the reinstatement application submitted pursuant to Title 8 of the Oregon State Bar's Rules of Procedure or pursuant to other state bar rules.)

(5) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

(6) REPRESENTATION STATEMENT:

I am representing the following party(s) in this case:

(7) CM/ECF REGISTRATION:

Concurrent with approval of this application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system (*see* ord.uscourts.gov/e-filing/cm-ecf-and-pacer), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(D) and the Local Rules of the District of Oregon.

DATED this _____ day of _____, _____

(Signature)

(Typed Name)